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Announcements

- On October 22, 2012, as a part of Durham County Government's new branding, the name and logo for the health department changed to the **Durham County Department of Public Health**. This is the original name of the organization, founded in 1913.
- Please visit the new county website at www.dconc.gov.
- Staff e-mail addresses have changed! Addresses previous using the @durhamcountync.gov format have changed to @dconc.gov.
- Information for healthcare providers will soon be available on the Public Health website, under Health Resources and Data, including communicable disease report forms.

Important Numbers

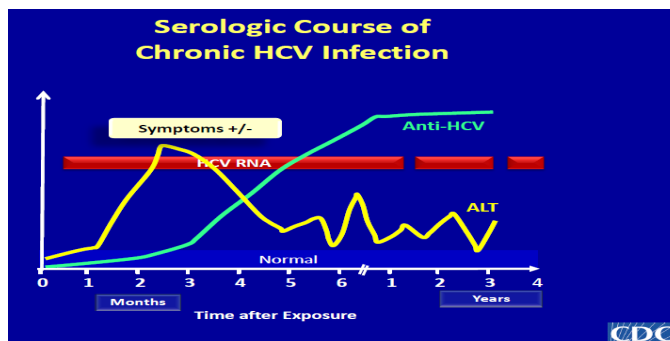
Main Number	(919) 560-7600
Communicable Disease Control Program	(919) 560-7600
Immunization Clinic	(919) 560-7608
Tuberculosis Clinic	(919) 560-7633

Durham County Communicable Disease Update for Healthcare Providers

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Hepatitis C Virus Screening

- In the United States, the estimated prevalence of persons with hepatitis C virus (HCV) infection is between 1% - 1.5%.
- However, the prevalence is higher at 3.3% among persons born during 1945-1965, which account for three-fourths of all chronic HCV infections among US adults.
- Therefore, the Centers for Disease Control and Prevention issued new recommendations in August 2012 for HBV screening among this birth cohort.
- Adults born during 1945-1965 should receive one-time testing for HCV without prior ascertainment of HCV risk.



- The figure above illustrates the serologic course of chronic HCV infection.
- A positive HCV antibody test should be followed by either a recombinant immunoblot assay for confirmation, or a HCV RNA polymerase chain reaction to determine if the patient has active HCV infection.
- Only acute HCV infections need to be reported to the health department. Chronic HBV infection is currently not a reportable condition in NC.
- For more information regarding the CDC recommendations and HCV infection, please go to www.cdc.gov/hepatitis/HCV/GuidelinesC.htm

Fungal Meningitis Outbreak



- The CDC continues its investigation of the multistate fungal meningitis outbreak in the US.
- The original source of the outbreak has not been determined; however, all infected patients identified thus far have received preservative-free methylprednisolone acetate (80mg/ml) from among the three lots voluntarily recalled by the New England Compounding Center on September 2012.
- The CDC has confirmed *Exserohilum rostratum* in clinical specimens from 52 patients with laboratory-confirmed fungal meningitis. Of the other two patients, one has been found to be infected with *Aspergillus fumigatus* and one with *Cladosporium*.
- In the US, there have been 363 reported cases of fungal infections linked to steroid injections, of which 7 have been peripheral joint infections. NC has had three reported cases of fungal meningitis linked to steroid injections.
- For additional clinical guidance regarding this outbreak, please go to www.cdc.gov/hai/outbreaks/clinicians/index.html